

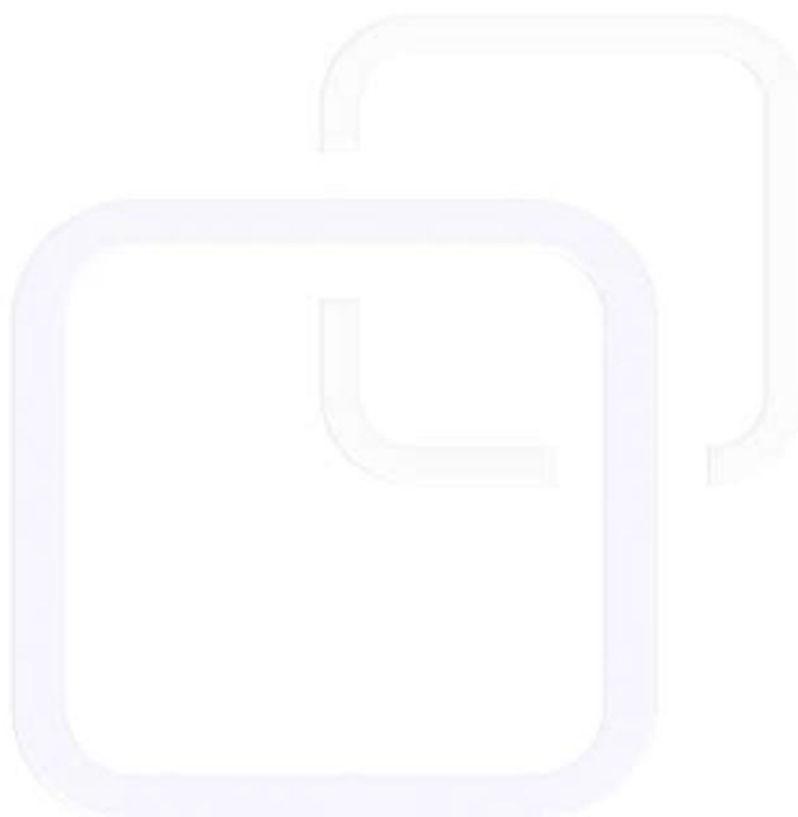


Laboratory Investigation Report

Name	: Mr. MUNEEB SIKANDER	Ref No.	: 45238
DOB	: 16/04/1990	Sample No.	: 2412514451
Age / Gender	: 34 Y / Male	Collected	: 16/12/2024 21:40
Referred by	: Dr. Enomen Goodluck Ekata	Registered	: 17/12/2024 15:29
Centre	: CITICARE MEDICAL CENTER	Reported	: 17/12/2024 17:49

BIOCHEMISTRY

Test	Result	Flag	Unit	Reference Range	Methodology
URIC ACID (SERUM)	5.6		mg/dL	3.4 - 7.0 Please note change. Source: Roche IFU.	Enzymatic colorimetric assay



Dr. Adley Mark Fernandes
M.D (Pathology)
Pathologist

Gyoma V. Shah
Dr. Vyoma V Shah
M.D (Pathology)
Clinical Pathologist

Mohammed Rashid Chenangadath
MOHAMMED RASHID CHENANGADATH
Laboratory Technologist

This is an electronically authenticated report

Page 1 of 3

Printed on: 17/12/2024 17:51

Test result pertains only to the sample tested and to be interpreted in the light of clinical history. These tests are accredited under ISO 15189:2012 unless specified by (^). Test marked with # is performed in an accredited referral laboratory.





BML502248

Laboratory Investigation Report

Name : Mr. MUNEEB SIKANDER
DOB : 16/04/1990
Age / Gender : 34 Y / Male
Referred by : Dr. Enomen Goodluck Ekata
Centre : CITICARE MEDICAL CENTER

Ref No. : 45238
Sample No. : 2412514451
Collected : 16/12/2024 21:40
Registered : 17/12/2024 15:29
Reported : 17/12/2024 17:49

BIOCHEMISTRY

Test	Result	Flag	Unit	Reference Range	Methodology
LIPID PROFILE TEST					
CHOLESTEROL (TOTAL)	156		mg/dl	Desirable: < 200 Borderline High: 200 - 239 High: ≥ 240 Please note change. Source: Roche IFU.	Enzymatic colorimetric assay
HDL CHOLESTEROL	35	L	mg/dl	40 - 60 Please note change. Source: Roche IFU.	Homogeneous enzymatic colorimetric assay
LDL CHOLESTEROL DIRECT	98		mg/dl	Optimal: < 100 Near/Above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: ≥ 190 Please note change. Source: Roche IFU.	Homogeneous enzymatic colorimetric assay
VLDL CHOLESTEROL	42	H	mg/dL	< 30	Calculation
NON-HDL CHOLESTEROL	140		mg/dL	< 140	Calculation
TRIGLYCERIDES	208	H	mg/dl	Normal: < 150 Borderline High: 150 - 199 High: 200 - 499 Very High: > 500 Source: Roche IFU.	Enzymatic colorimetric assay
TOTAL CHOLESTEROL / HDL RATIO	4.5			< 4.5	Calculation
LDL / HDL RATIO	2.8			< 3.5	Calculation

Dr. Adley Mark Fernandes
M.D (Pathology)
Pathologist


Dr. Vyoma V Shah
M.D (Pathology)
Clinical Pathologist

This is an electronically authenticated report

Page 2 of 3


MOHAMMED RASHID CHENANGADATH
Laboratory Technologist

Printed on: 17/12/2024 17:51

Test result pertains only to the sample tested and to be interpreted in the light of clinical history. These tests are accredited under ISO 15189:2012 unless specified by (^). Test marked with # is performed in an accredited referral laboratory.





BML502248

Laboratory Investigation Report

Name	: Mr. MUNEEB SIKANDER	Ref No.	: 45238
DOB	: 16/04/1990	Sample No.	: 2412514451
Age / Gender	: 34 Y / Male	Collected	: 16/12/2024 21:40
Referred by	: Dr. Enomen Goodluck Ekata	Registered	: 17/12/2024 15:29
Centre	: CITICARE MEDICAL CENTER	Reported	: 17/12/2024 17:49

IMMUNOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
VITAMIN D, 25-OH (TOTAL)	10	L	ng/mL	Deficiency: <20 Insufficiency: 20 - <30 Sufficiency: 30 - 80 Toxicity: >80 Please note change. Source: Roche IFU.	ECLIA

INTERPRETATION NOTES :

Vit D (25 – OH) is the sum of Vit D2 (25 – OH) and Vit D3 (25 – OH). In normal persons not taking external supplements - Vit D3 comprises approximately 90 % of the total.

25 hydroxy (25–OH) vitamin D3 or calcidiol is the storage form of vitamin D3. Deficiency is associated with osteoporosis, multiple sclerosis, and rheumatoid arthritis, and mood disorders. Both Vitamin D2 and Vitamin D3 are converted to 25–OH vitamin D3 in the liver. 25 hydroxy vitamin D3 circulates to the kidney where it is converted to 1, 25 hydroxy vitamins D3 or calcitriol, the functional form of the vitamin.

Calcitriol is vital to calcium regulation and low serum calcium causes release of parathormone which converts 25–OH vitamin D3 to 1, 25 –OH vitamin D3 which then triggers osteolysis releasing calcium into the bloodstream.

Sample Type : Serum

End of Report

Dr. Adley Mark Fernandes
M.D (Pathology)
Pathologist

Gyoma V. Shah
Dr. Vyoma V Shah
M.D (Pathology)
Clinical Pathologist


MOHAMMED RASHID CHENANGADATH
Laboratory Technologist

This is an electronically authenticated report

Page 3 of 3

Printed on: 17/12/2024 17:51

Test result pertains only to the sample tested and to be interpreted in the light of clinical history. These tests are accredited under ISO 15189:2012 unless specified by (^). Test marked with # is performed in an accredited referral laboratory.

